REQUEST FOR EXEMPTION FROM KTRS EMPLOYMENT LIMITATIONS

KENTUCKY TEACHERS' RETIREMENT SYSTEM 479 Versailles Road Frankfort, Kentucky 40601-3800 (502) 848-8500

Fiscal Year	RE:	
	TC2.	Name of KTRS Retiree
		Social Security No.
The		School District/Agency/University wishes
to employ the above referenced retire we believe to be exempt from jurisdi	ed member o	of the Teachers' Retirement System in a capacity that
_		t the Teachers' Retirement System in determining sition is exempt from the employment limitations that
Title of position:		
Person who last hel	d the positio	n:
Social Security Nur	mber:	
Compensation of re	tiree: \$	
Please attach a copy of the following	Minimu Employ	Description m Educational Qualifications ment Agreement I Service Contract
Title of last position held by retiree particles of last particles of		
Date		
		gnature District/Agency Head
a determination as to whether emple	oyment, in a	KTRSONLY when an employer makes a request for any capacity, whether employer/employee, personal t from KTRS limitations. Please note instructions on
	(FOR USE (OF KTRS ONLY)
Based upon the information available to employment by KTRS retirees in the po		Teachers' Retirement System, it has been determined that ied on this form is:
Exempt from KTRS limitations		
Subject to KTRS limitations		
Date 20		KTRS Representative

12/2003 RETEMPL/FORM 30-E

KENTUCKY TEACHERS' RETIREMENT SYSTEM 479 VERSAILLES ROAD FRANKFORT, KENTUCKY 40601-3800 PHONE (502) 848-8500

INSTRUCTIONS FOR COMPLETING FORM 30-E

This form is to be used by employers to request the Kentucky Teachers' Retirement System to render a decision as to whether the re-employment of a KTRS retiree is exempt from the standard employment limitations. All KTRS retirees employed in any capacity will be subject to the employment limitations unless the employer obtains a written determination from KTRS that employment for a particular position is exempt from KTRS restrictions. Please provide all the requested information and documentation to avoid a delay in the processing.

In the absence of an exemption determination by KTRS, employment of KTRS retirees in any capacity is subject to the employment limitations and must be reported to KTRS on the annual report at the close of a school year.

Information Required from District for KTRS to make Decision

- 1. **Title of position** -- actual title of position. This must match the position description.
- 2. **Person who last held position** -- the last person holding the position prior to the retiree.
- 3. **Social Security Number** -- Number for the last person holding the position prior to the retiree.
- 4. **Compensation of Retiree** -- Salary the retiree will receive. This may be reported hourly, daily or annually.

THIS FORM IS TO BE COMPLETED ANNUALLY AND PRIOR TO THE RETIREE'S EMPLOYMENT

12/2003 RETEMPL/FORM 30-E